

## EDUCATION

# The Stubborn Culture of Harassment in America's Medical Schools

A Yale cardiologist accused of sexual misconduct received one of the university's highest honors, and the aftermath has revealed how much power men still have in academic medicine.

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When Yale University announced in summer 2018 that the renowned cardiologist Michael Simons had received a prestigious endowed professorship, his colleagues at the university's medical school did not rush to congratulate him. On the contrary, they were outraged.

"I was appalled," says Nancy Ruddle, an epidemiology professor. Nina Stachenfeld, another researcher at the medical school, got the news from a friend who had also just received an endowed chair, one of the highest honors a university can bestow. "We were both absolutely shocked," she recalls.

The reason for their shock was this: In 2013, Simons lost his position as the chief of Yale's cardiology division after a university committee found that he had sexually harassed a postdoctoral researcher and had publicly derided her boyfriend, a colleague who worked under his supervision. The committee called for Simons to be permanently removed from his cardiology position and barred from other leadership roles for five years. But Yale's provost, Ben Polak, reduced that punishment to an 18-month suspension from the cardiology job, allowing Simons to keep two other leadership positions. Simons eventually decided not to return as cardiology chief, and he now runs a lab in the medical school's cardiovascular-research center.

[ *Read more: How women are harassed out of science* ]

Polak's decision enraged many of the school's faculty and made headlines in *The New York Times*. For years, Yale's handling of the Simons case has remained an "open wound," Stachenfeld says. And in early September 2018, more than 1,000 medical-school students, trainees, alumni, and faculty members signed a letter to Yale's president, Peter Salovey, voicing "disgust and disappointment" with the university's decision to award Simons the endowed title.

Simons's appointment sparked a broader conversation about gender equity and sexual misconduct at the medical school, and about what some on campus describe as a culture that tolerates discrimination and harassment. In 1992, women held two of the school's department chairs in the basic-science and clinical fields. Twenty-seven years later, that number is four out of a total of 28. "There's a lack of women in key leadership roles at the school," says Stachenfeld, who co-chairs the university's faculty-led committee on women in medicine. "Because of that, there's a problem with sexual harassment and there's a fear of reporting sexual harassment."

Despite the backlash against Simons, Yale initially held its ground. Then, on September 21, 2018, less than three months after Simons was given the endowed professorship, the longtime dean of the medical school, Robert Alpern, announced that he would rescind the title, "out of concern for the community's well-being." But tensions remained high. In November, the *Yale Daily News* described a culture of "open secrets" at the medical school, and in late December, amid a swirl of recriminations over his handling of the Simons case, Alpern announced that he would step down as dean.

Last year, for the first time ever, more women than men started medical school. But as the controversy at Yale shows, that milestone does not tell the whole story of women's experiences in academic medicine. In June 2018, a report by the National Academies of Sciences, Engineering, and Medicine found that 50 percent of female medical students reported having been sexually harassed. And over the past year and a half, high-profile cases such as the sentencing of the former USA Gymnastics team doctor Larry Nassar and the abrupt resignation of the medical-school dean at the University of Southern California amid revelations that he'd been disciplined by the university for sexual misconduct in 2003 have shone a spotlight on harassment and abuse in the traditionally male-dominated field of medicine. (The former USC dean, Rohit Varma, declined to be interviewed.)

*[ Read more: How colleges foretold the #MeToo movement ]*

Until last summer, Simons had held an endowed professorship named for the former medical-school dean Robert Berliner. But Berliner's daughter, Nancy Berliner, the chief of hematology at Brigham and Women's Hospital in Boston, complained to Yale that it was inappropriate for Simons to continue to hold that position, given the accusations against him. In June, the university transferred Simons to a different endowed professorship.

"In making this transfer, the University had no intention to confer a new honor on Dr. Simons," the university spokeswoman Karen Peart said in a statement to the *Yale Daily News*.

But in a June 22 letter congratulating Simons on his new appointment, Salovey, Yale's president, struck a different tone. "Endowed chairs are awarded to those whose scholarship has brought distinction to the university," he wrote to Simons, whom he addressed as "Mike." "I am delighted to convey our pleasure in your accomplishments."

Critics have long argued that Yale's administration went too easy on Simons in 2013. Alpern, the medical-school dean, did little to alleviate those concerns during a tense meeting in September 2018 with Yale's committee on women in medicine. As he sought to justify the university's decision to give Simons a new endowed title, two professors who attended the meeting say Alpern described the superstar cardiologist as "defenseless."

“This medical school is his house,” says Lynn Fiellin, an associate professor at the medical school, of Alpern. “He is the one who should be able to step up and set the tone and do the right things. Not just say things, not just create committees or town halls or what have you. Actually take the action that is necessary.”

At the beginning of the fall-2018 semester, Alpern, who started as dean in 2004, planned to seek a fourth five-year term as the medical school’s top administrator. But before the holidays, he instead announced that he would leave the position, saying he plans to stay on the faculty and pursue academic interests.

In an email, Alpern declined to comment on his meeting with the women in medicine committee, and on anything to do with Simons, who sued Yale over its decision to strip him of his new professorship. (Simons eventually withdrew the lawsuit, and neither he nor his lawyer, Norm Pattis, responded to requests for comment.) But Alpern defended his leadership of the medical school, emphasizing that he made salary equity a priority of his tenure and that the percentage of female faculty members has increased from 29.5 percent in 2004 to 39.4 percent in 2019. “The Yale School of Medicine does not tolerate sexual misconduct,” he wrote. “We would never allow anyone who has been accused of misconduct to receive special treatment because of their academic accomplishments.”

A Yale spokesman said Salovey, the university president, was not available for an interview. But in a short statement, Salovey said the medical school “has more work to do” in promoting gender equity. “In recruiting a new dean” of the Yale School of Medicine, he wrote, “I will seek an individual for whom advancing gender equity and eliminating sex-based and other forms of discrimination and harassment are the highest priorities.”

Not every faculty member believes the school faces a crisis. Linda Mayes, who runs the medical school’s Child Study Center, calls the Simons controversy a “distraction” from the medical school’s recent efforts to promote gender equity, such as the appointment of a deputy dean focused on diversity and the rollout of a more generous parental-leave policy, among other initiatives. “I understand the feelings,” Mayes says, “but there’s a lot going on that’s very positive.”

In recent years, some universities and medical institutions have taken steps to curb sexual misconduct and to improve gender equity. In April 2018, USC appointed the geriatrician Laura Mosqueda as its medical-school dean, making her the first

woman to hold the position. The University of Michigan recently conducted a comprehensive survey to diagnose the extent of harassment in its medical school. And in November 2018, the National Institutes of Health launched an anti-sexual-harassment website that outlines the organization's policies on misconduct, including a new initiative designed to make harassment easier to report.

But on their own, such initiatives are unlikely to solve the problem, the causes of which are myriad and deep-rooted. Women hold only 16 percent of departmental-chair positions at medical schools, and the strict hierarchical structure of the profession sometimes forces victims of harassment to choose between career advancement and personal safety. When harassment does come to the attention of university administrators, experts we spoke to claimed that officials may be motivated to protect “superstar” doctors who win valuable government grants that fund research and bring prestige to universities. Simons is one such superstar: Last year, he was the principal investigator on four different projects that cost a total of around \$3 million in grants, according to the National Institutes of Health.

“We haven’t really made much progress in diversifying the leadership of health care,” says Esther Choo, a doctor at Oregon Health & Science University who wrote an article about sexual harassment for *The New England Journal of Medicine*. “As long as that is true, it’s likely that none of these toxic cultures will change. But none of it is particular to Yale. I don’t know of a health-care system or a health-professional school that is succeeding in this area.”

At Yale’s medical school, advocates have proposed a number of strategies to elevate women leaders, including term limits for departmental chairs, some of whom have held their position for decades. Ultimately, though, the success or failure of reform efforts will depend on the tone set by the next dean. “There needs to be a strong moral compass and a group of leaders who not only say they believe that sexual harassment and gender harassment should not happen, but they actually take action,” says Fiellin, the associate professor. “That has to come from the top.”

For years, Reshma Jagsi has spent much of her time talking about what happens in the absence of such leadership. Jagsi, a radiation oncologist at the University of Michigan, travels the country giving talks on gender equity in medicine. Lately she’s started arguing that the story of Simons’s endowed professorship illustrates an important lesson from organizational psychology: that the strongest predictor of

sexual harassment in an organization is the perception among members that the organization tolerates such behavior.

But when she tells that story, she says, she also emphasizes its ending: a renewed effort by Yale students and faculty members to promote gender equity and curb sexual harassment at the medical school. “The community is coming together in a very heartening way,” Jagsi said. “So I use it as an example of both things—organizational tolerance, and how an organization can come together to change that.”

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